

CHAMPVA POLICY MANUAL

CHAPTER: 2
SECTION: 4.6
TITLE: PERCUTANEOUS TRANSLUMINAL ANGIOPLASTY (PTA)

AUTHORITY: 38 CFR 17.270(a) and 17.272(a)

RELATED AUTHORITY: 32 CFR 199.4(c)(2)(i)

I. EFFECTIVE DATE

December 29, 1982

II. PROCEDURE CODE(S)

35470-35476, 75962-75968, 92982-92984, 92997 and 92998

III. DESCRIPTION

This procedure involves inserting a balloon catheter into a narrow or occluded artery in order to canalize and dilate the artery by inflating the balloon.

IV. POLICY

A. Percutaneous Transluminal Angioplasty (PTA) in the treatment of arteriosclerotic obstructions in the lower extremities (i.e., abdominal aorta, subclavian artery, the iliac, femoral, popliteal and tibial peroneal arteries) are covered. Coverage is also available for PTA of the abdominal aorta as an adjunct to PTA of the iliac arteries and other lower extremities with evidence of existing aortoiliac atherosclerotic disease.

B. Effective January 23, 1991, PTA may be covered for treatment of obstructive lesions of hemodialysis access fistulas.

C. Effective January 31, 1992, CHAMPVA may cost share the Advanced Interventional Systems (AIS) Excimer Laser Angioplasty System, used separately or in conjunction with a PTA procedure, for treatment of occlusions of the coronary arteries with lesions greater than 20 millimeters in length.

V. POLICY CONSIDERATIONS

A. Coverage criteria regarding Percutaneous Transluminal Coronary Angioplasty (PTCA), and AIS Excimer Laser Angioplasty System with or without PTCA can be found in [Chapter 2, Section 4.10](#), *Percutaneous Transluminal Coronary Angioplasty (PTCA)*.

B. Presently, there is no CMAC or CPT code assigned for the AIS Excimer Laser Angioplasty procedure. Until a code is assigned, claims processed shall follow the reimbursement methodology outlined in the Policy Manual at [Chapter 3, Section 5.1](#), *Outpatient and Inpatient Professional Provider Reimbursement*. These reimbursement procedures apply when the service is billed as a separate procedure and when the service is billed in conjunction with PTA.

VI. EXCLUSIONS

PTA in the treatment of obstructive lesions of the carotid, vertebral, and cerebral arteries.

END OF POLICY